

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA				FOR COURT USE ONLY DUE DATE:	
TRANSCRIPT DESIGNATION AND ORDERING FORM					
1. NAME Molly M. Lens		2. PHONE NUMBER (310) 553-6700		3. DATE Oct 8, 2014	
4. FIRM NAME: O'Melveny & Myers LLP			5. E-MAIL ADDRESS: mlens@omm.com		
6. MAILING ADDRESS 1999 Avenue of the Stars, 7th Floor			7. CITY Los Angeles		8. STATE CA
9. ZIP CODE 90405					
10. CASE NUMBER 2:12-cv-09912-AB-SH		11. CASE NAME Fourth Age Ltd., et al., v. Warner Bros. Digital Distribution, et al.			12. JUDGE Hon. André Birotte
13. APPEAL CASE NUMBER		14. ORDER FOR <input type="checkbox"/> APPEAL <input checked="" type="checkbox"/> NON-APPEAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> AUSA <input type="checkbox"/> FPD <input type="checkbox"/> OTHER			
15. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested) Attach additional page for designations if necessary.					
HEARING DATE	COURT REPORTER	PROCEEDINGS			
Oct 6, 2014	Chia Mei Jui	<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input checked="" type="checkbox"/> OTHER (PLEASE SPECIFY): Motion for Review of Magistrate Order			
		<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (PLEASE SPECIFY):			
		<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (PLEASE SPECIFY):			
		<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (PLEASE SPECIFY):			
		<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (PLEASE SPECIFY):			
16. ORDER: IF ORDERING BOTH PAPER AND ELECTRONIC COPIES, THERE WILL BE AN ADDITIONAL CHARGE.					
CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FORMAT			
ORDINARY	<input type="checkbox"/>	PAPER COPY	<input checked="" type="checkbox"/>		
14 DAYS	<input type="checkbox"/>	PDF FORMAT	<input checked="" type="checkbox"/>		
7 DAYS	<input checked="" type="checkbox"/>	ASCII FORMAT	<input type="checkbox"/>		
DAILY	<input type="checkbox"/>	OTHER	<input type="checkbox"/>		
HOURLY	<input type="checkbox"/>	FOR ADDITIONAL COPIES, CONTACT COURT REPORTER OR TRANSCRIPTION AGENCY			
REAL TIME	<input type="checkbox"/>	19. Transcription agency for digitally recorded proceedings:			
(CERTIFICATION 17 & 18) By signing the below, I certify that I will pay all charges (deposit plus additional).		20. Month: Day: Year: Transcript payment arrangements were made with:			
17. DATE: Oct 8, 2014		NAME OF OFFICIAL: _____			
18. SIGNATURE: /s/ Molly M. Lens		Payment of estimated transcript fees were sent on the following date: Month: Day: Year:			